

Kent Appelhans, Chair Mark Marchetta, Sr., Vice Chair Dr. Carol Cunningham, State Medical Director

TRAUMA COMMITTEE

<u>Committee Meeting Date and Location:</u> Wednesday, November 10, 2021, at the ODPS Shipley Building, 1970 W. Broad St, Columbus, OH 43223.

<u>Committee Members Present:</u> Diane Simon - Chair, Dr. Michael Beltran, Dr. Erik Evans, Dr. Kent Harshbarger, Mr. Joseph Natko, Mr. Darin Robinaugh, Dr. James Sauto, Angela Schetter, Dr. Rajan Thakkar, Ms. Rachel Velasquez, and Ms. Julie Warholic.

<u>Committee Members Absent:</u> Dr. Marco Bonta, Ms. Sara Brokaw, Dr. Jeff Claridge, Ms. Patricia Hightower, Dr. Laurie Johnson, Ms. Fran Lauriha, Dr. Travis Perry, Dr. Michael Shannon, and Ms. Tammy Wilkes.

<u>DPS and EMS Staff Members Present:</u> Executive Director Rob Wagoner, Deputy Director Aaron Jennings, State Medical Director Dr. Carol Cunningham, Research & Analysis Section Chief Eric Mays, Sahithi Aurand, Robin Burmeister, Beverly Cooper, Valerie Koker, Heidi Piccininni, and Julia Wiedemann.

<u>Visitors in Attendance:</u> Ms. Jolene Defiore-Hyrmer (ODH), Dr. Richard George (Summa), Ms. Sherri Kovach (COTS), and the following from the University of Toledo Medical Center (UTMC): Dr. Aela Vely, Ms. Chris Stesney-Ridenour, Ms. Kristin Calkins, Mr. Eli Faes, Mr. Rick Swaine, and Mr. Troy Judy.

Welcome and Introductions

The meeting was called to order at 10:04 am. Chair Diane Simon welcomed everyone. Quorum was attained. Everyone in attendance introduced themselves.

<u>AGENDA ITEMS</u>

Education

Typically, the Trauma Committee meeting begins with an education segment. This agenda item was suspended for this meeting.

Approvals and Items Requiring Action

Past Meeting Minutes

<u>ACTION:</u> Motion to approve the meeting minutes from March 10, 2021. Dr. Evans – First. Ms. Velasquez – Second. None opposed. None abstained. Motion approved.

<u>ACTION:</u> Motion to approve the meeting minutes from May 12, 2021. Dr. Sauto – First. Dr. Beltran – Second. None opposed. None abstained. Motion approved.

<u>ACTION:</u> Motion to correct the meeting minutes from January 13, 2021, with the corrected year of the meeting. Dr. Thakkar – First. Dr. Harshbarger – Second. None opposed. None abstained. Motion approved.

New Business Item, UTMC Level II Provisional Status, moved due to this point in the meeting

The University of Toledo Medical Center (UTMC) had requested to move from a currently verified Level III Trauma Center to a provisional Level II Trauma Center. ORC 3727.101 requires a verified trauma center seeking verification at a different level to submit an application to the American College of Surgeons (ACS) for a consultation visit. The ACS informed UTMC that it needs state approval to use the ACS focused visit on 5/17/21 in lieu of a consultation visit since the ASC is backlogged for months to do any additional visits. The ACS recommended UTMC be verified as a Level II Trauma Center from its 5/17/21 visit, but the UTMC administration requested and received Level III Trauma Center verification.

After discussion, Mr. Natko moved to approve the 2019 ACS focused visit [expiration date extended due to the COVID-19 pandemic] to be used as the consultation visit for UTMC's quest for Level II Trauma Center verification; Dr. Harshbarger seconded it.

<u>ACTION:</u> Motion to allow UTMC to use 2019 ACS focused visit as the required consultation visit for Level II Trauma Center verification so that UTMC can move forward with a Level II provisional status. Mr. Natko – First; Dr. Harshbarger – Second. None opposed. Ms. Simon abstained. Motion approved.

<u>Current status of Trauma Administration at the Ohio Department of Public Safety</u>

Executive Director Wagoner reported that the Data staff is now fully staffed. Introductions of the new staff were made by Mr. Eric Mays, EMS Data Chief. The EMS website updates made by Deputy Director Aaron Jennings were recognized. Ms. Burmeister was introduced as the new committee support staff.

Discussion ensued in regards to the Trauma Committee meeting virtually. As the Trauma Committee is a statutory committee, it must meet in-person. There is proposed legislation that would allow committees to meet virtually. However, unless legislation is passed and signed into law, the committee will be required to conduct business through in-person meetings.

System Update

System Status

Trauma Center Status

Ms. Simon reported that some trauma centers are having their reverifications completed by the ACS. The ACS is meeting virtually with the centers. There are some delays with centers getting their written reports. Currently there are six provisional centers, all being Level III. UTMC will make seven but at Level II. There are now 43 trauma centers and eight pediatric trauma centers.

Data Submission Status

Mr. Mays indicated that a reporting extension that initially went through the first and second quarters of 2021 has been extended through December. As of this date, 11,652 records have been received. This is compared to over 80,000 records for the same timeframe last year. It is the hope that hospitals will begin submitting their data to the registrar as the December deadline approaches.

Member Status

Ms. Simon reported that there are four committee seat vacancies: #6 (PM&R Physician), #10 (Chief Air Medical Officer), #14 (Trauma Registrar), and #22 (Non-Trauma Center Hospital Representative). Nominations for Seat 14 have now been received, and Ms. Simon will review the nominations for further handling.

Ms. Simon reminded the committee that per the Ohio Revised Code, only one person from one health system can serve on the committee, and this has become restrictive. It is the hope that a change to this restriction can be added to upcoming legislation to allow for up to two representatives per health system to serve on the committee.

Liaison Reports

Legislative Updates

Executive Director Wagoner provided updates he recently received on the following:

House Bill 23 – Dementia Training.

Had fourth hearing in October 2021. Deals with requiring EMS and peace officers to undergo dementia-related training. The bill is slowing moving forward.

House Bill 43 – Public Bodies Meeting.

Only hearing to date was in February 2021. Does not appear to have much support.

House Bill 138 – Amend Codes in 4765 regarding scope of practice.

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Held second hearing in October 2021. Making slow progress.

House Bill 392 – Allow ambulance transport of a police dog injured in the line of duty to a trauma center or veterinary hospital. Held its first hearing in October 2021.

Senate Bill 4 – Exempts EMS line operators from public records.

National Guard, EMS telecommunicators, protective service workers, mental healthcare workers, and others whose personal and familiar information was not protected will now be protected from public disclosure.

Senate Bill 21 – Improve Stroke Protocol.

Dr. Cunningham and Executive Director Wagoner have been very involved in discussing the need for the state acute stroke guideline to be updated. Passed and effective June 22, 2021.

State Board of Emergency Medical, Fire and Transportation Services (EMFTS Board)

Executive Director Wagoner reported that all Board seats are currently filled; however, on November 12th six seats will open up. Those current six members will remain for 60 days after expiration and will vacate their seats in January 2022. Nominations will be sought from the nominating organizations with the goal to have nominees vetted and seated by February 2022.

Executive Director Wagoner reported that the Board retreat will now be held in April instead of February. This will facilitate the ability of new board members to attend the retreat.

State Medical Director

Dr. Cunningham reported that the Regional Physician Advisory Board (RPAB) held its chairpersons and annual all-member meeting last week. Senate Bill 21 was discussed and it requires that the EMFTS Board develop guidelines with consultation with hospital leaders and partners. Comments received on the first draft were, if accepted, added to second draft. Individuals who submitted comments were sent a letter explaining why some comments were included and others were not. Comments on the second draft are to be submitted by November 15, 2021, so that it can be updated and be submitted to the EMFTS Board for review at its December 2021 meeting. If approved by the EMFTS Board, the guidelines will then need to be posted to the Division of EMS website for public review. Acute stroke protocols from local EMS medical directors will be submitted to the Division of EMS, the RPAB and the ODH by March 20, 2022. Local stroke protocols, along with any revisions, must be submitted annually starting July 1, 2023.

Dr. Cunningham serves on the OnStar® Safety Advisory Council. One important development is a hands-on course for vehicle crashes for hybrid cars requiring extrication. It is available nationally. Due to manpower and resources required for the course, she suggested that it is ideal for regions who wish to team up and hold a large conference regarding safety concerns and issues physicians may face when dealing with patients involved in these accidents. Chemical releases, such as hydrofluoric acid, is a concern as physicians usually see topical exposures to this substance rather than inhalation injuries from its vapor form. A patient may appear stable and then collapse six hours later. If any group is interested in hosting a course, contact Dr. Cunningham and she will reach out to General Motors to arrange it.

Ohio Department of Health (ODH)

Ms. Jolene Defiore-Hyrmer reported that reports will now be on the ODH website with monthly data about drug overdoses and suicides. The ODH is providing suicide prevention resources that the overdose and fatality review boards approved.

Ms. Defiore-Hyrmer also reported that the child restraints/seats given to low-income families is encountering distribution issues due to sites closing and citation income from violations being reduced. The citation income was used to offset the cost of the seats. Sites need to be opened for distribution of safety seats.

Teen driving schools have moved to online training and a driving toolkit for schools.

Workgroup Reports

EMS Workgroup (on hiatus)

Performance Improvement (PI) Workgroup

Mr. Mays reported that the group is working on the 2020 trauma registry report, and it will be released for final review in the near future. Ms. Simon reported that the goal is to have the report finalized in January and submitted for to the EMFTS Board for review in February.

Trauma Registry Advisory Workgroup (TRAW)

Mr. Mays reported that the focus has been on completing the 2022 trauma data dictionary. No substantial changes were been made this year by the ACS. The final version has been forwarded to the vendors. He hopes to receive the newly consolidated regional dictionary soon so that is can be consolidated as an appendix item into the 2022 data dictionary prior to posting on the EMS website.

Rehabilitation Subcommittee (on hiatus)

Epidemiology Intelligence Service (EIS) Evaluation Workgroup (on hiatus)

Human Resources (HR) Ad Hoc Committee

Ms. Velasquez reported that due to deployments, she has been unable to participate in meetings.

Scope of Practice (SOP) Ad Hoc Committee

Ms. Velasquez reported that community paramedicine is being reviewed and they hope to expand it under a paramedic's role. In addition, public education will be increased on how paramedicine is important and helps with safety prevention. Executive Director Wagoner reported that a certification level cannot be created within another certification. In addition, care needs to be taken so that the additional associated education will be elective so as not to impede the state's education instruction. Care must be taken to remain within the current laws and rules.

Trauma Committee Strategic Plan Focus

Resource Assessment/Competent Workforce - Updated Innovative Emergency Management® (IEM) Report

Ms. Simon stated that the IEM[®] report is a based on a grant to study the workplace competency of our physicians, nurses, and EMS assistants. Using the report, the group separated it into rural focus and global focus (the Universal Trauma Workgroup). She is the lead for the Rural Workgroup.

The group has met several times. Members were given regional assignments and made phone calls. In regards to rural trauma education, one issue that was very clear is that if personnel are pulled away for a run, they need to be able to resume where they left off and not have to start the training from the beginning. The second issue is that the training goes to the rural communities and not to expect personnel in those communities to have the time or resources to travel for training opportunities.

The Rural Trauma Team Development is a great course, but it is done regionally. Physicians get most of their trauma training online and onsite. Nurses want to see the TNCC program mandated. Unfortunately, staffing shortages does not allow any flexibility to travel to training programs.

One solution would be to have small critical care hospitals partner with Level III trauma centers and offer classes together. Recruitment of instructors for TNCC training programs is also an issue. Fortunately, more virtual classes are becoming available. A mobile SIMS unit would aid in hybrid courses.

Universal Trauma Workgroup

Dr. Beltran reported that most deficiencies in education are in the rural areas. The group plans to meet again and should be able to wrap up its project at that time.

System Oversight - Ohio Regional Trauma Organizations Coalition (ORTOC)

Ms. Simon reported that it met last week and is completing version 2.0 regarding trauma data. It is done regionally and then merged together. The group is also working on a publication of its process for the Journal of Trauma Nursing, a publication of the Society of Trauma Nurses. It is also reviewing NFTI (need for trauma intervention) criteria (patient condition vs ISS score).

OLD BUSINESS

Rules Update

Ms. Cooper reported that two chapters of trauma rules are to be submitted to JCARR by October 2022. The latest version was emailed to the committee this month. There will be a correction to rule 4765-14-02, which she provided to the committee members. She suggested

that the version be prepared for submission to CSIO with the goal for EMFTS Board approval by April 2022.

<u>ACTION:</u> Motion to submit rules, as amended, with the Common Sense Initiative Office, for its review and input. Dr. Sauto – First; Ms. Velasquez – Second. None opposed. None abstained. Motion approved.

EMS Incident Reporting System (EMSIRS) - Update

Mr. Mays reported that the Division of EMS has received over 1.7 million run records for 2021 so far. Records need to be closed before they are submitted which can cause a lag in submission. Updates and resubmissions are common due to coding changes and chart altering. The system holds the latest updates only so it is unknown "what" was changed. Mr. Mays said now that he is fully staffed that they will be able to clarify what changes are taking place and causing resubmissions.

Mr. Mays reported that staff is contacting agencies that they have not had any recent contact with and confirming that contact information, medical director, and other information are current in the system. There appears to be some resistance by agencies to utilize the system.

Mr. Mays ended by reporting that the top four primary impressions requiring transportation by EMS so far in 2021 are weakness, altered mental status, chest pain unspecified, and generalized abdominal pain.

New Trauma Committee Strategic Plan

Ms. Simon suggested that the committee start considering adopting a new strategic plan and where the committee's future focus should turn to.

NEW BUSINESS

EMS Packing of Wounds

As result of the "Stop the Bleed" program, it has been discovered that a librarian, for example, can pack a wound but not a certified EMS responder as this psychomotor skill is not within the Ohio EMS scope of practice. In addition to the issue of not being able to pack the wound, there are issues about the material or substance utilized for wound packing. Wound packing is in the recently revised National EMS Scope of Practice Model. The hurdle is that anything in the Ohio EMS scope of practice has to be taught in an EMS accredited training site. That rule needs to be changed to enable additional or more specialized services and psychomotor skills to be added to the Ohio EMS scope of practice. The Scope of Practice (SOP) Ad Hoc Committee has been tasked to address this issue. Ms. Velasquez will take the matter to the SOP Ad Hoc Committee and report back in January 2022.

[At 11:58 a.m., Dr. Harshbarger left the meeting and the meeting quorum was lost.]

Child Fatality Review Board (CFRB)

Ms. Simon reported that the CFRB meets twice a year and that she now sits on their board. They are reviewing the 2020 ODH data regarding intentional vs. unintentional deaths (COVID-19, influenza, and other causes and conditions). Ms. Simon will provide information to the committee at a future meeting.

Open Forum – No matters were brought before the committee.

Recap of Action Items

Executive Director Wagoner: (1) Follow up with UTMC regarding today's motion so they can start down the path to obtaining Level II Trauma Center status; (2) send out the draft of the 2020 trauma report to the Trauma Committee for approval at the January 2022 meeting for submission to the EMFTS Board Meeting; and (3) work with Ms. Velasquez to take the wound packing issue to the SOP Ad Hoc Committee.

Adjournment

There was no further business.

Ms. Velasquez moved to adjourn the meeting, and Dr. Thakkar seconded it. The meeting was adjourned at 12:12 p.m.

<u>ACTION:</u> Motion to adjourn the meeting. Ms. Velasquez – First; Dr. Thakkar – Second. None opposed. None abstained. Motion approved.

Next meeting:

The next Trauma Committee meeting is scheduled on January 12, 2022, from 10am – 1pm. It will be held in-person at the Department of Public Safety, 1970 W. Broad Street, Room 1106, in Columbus, Ohio.

Respectfully submitted,

/s/ Robin Burmeister
Trauma Committee Secretary